

Printed 05/10/1999

SERIAL NUMBER 09/212,270	FILING DATE 12/16/1998	CLASS 536	GROUP ART UNIT 1646	ATTORNEY DO 02441.77
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APPLICANT
CATHERINE TRIBOULEY, SAN FRANCISCO, CALIFORNIA; DAVID POT,
SAN FRANCISCO, CALIFORNIA; ALTAF KASSAM, OAKLAND, CALIFORNIA; GEORGE
LAMSON, MORAGA, CALIFORNIA.

CONTINUING DOMESTIC DATA***
VERIFIED PROVISIONAL APPLICATION 60/068,959 12/30/1997
ETA

371 (NAT'L STAGE) DATA***
VERIFIED
ETA

FOREIGN APPLICATIONS***
VERIFIED
ETA

Foreign priority claimed 35 USC 119 (a-d) conditions met	<input type="radio"/> yes <input checked="" type="radio"/> no <input type="radio"/> yes <input type="radio"/> no <input type="radio"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWINGS 5	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 11
Verified and acknowledged <u>Eileen O'Hare</u> <u>ETA</u> Examiner's Name Initials					

ADDRESS
CHIRON CORPORATION
INTELLECTUAL PROPERTY R440
P O BOX 8097
EMERYVILLE , CA 94662-8097

TITLE
MEMBERS OF TNF AND TNFR FAMILIES

FILING FEE RECEIVED \$*1514	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="radio"/> All Fees <input type="radio"/> 1.16 Fees (Filing) <input type="radio"/> 1.17 Fees (Processing Ext. of Time) <input type="radio"/> 1.18 Fees (Issue) <input type="radio"/> Other _____ <input type="radio"/> Credit
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SERIAL NUMBER 09/212,270	FILING DATE 12/16/98	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. 02441.77733
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APPLICANT
CATHERINE TRIBOULEY, SAN FRANCISCO, CA; DAVID POT, SAN FRANCISCO, CA;
ALTAF KASSAM, OAKLAND, CA; GEORGE LAMSON, MORAGA, CA.

CONTINUING DOMESTIC DATA***
VERIFIED PROVISIONAL APPLICATION NO. 60/068,959 12/30/97

371 (NAT'L STAGE) DATA***
VERIFIED

FOREIGN APPLICATIONS***
VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/21/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 11
Verified and Acknowledged Examiner's Initials _____ Initials _____					

ADDRESS CHIRON CORPORATION INTELLECTUAL PROPERTY R440 4560 HORTON STREET P O BOX 8097 EMERYVILLE CA 94608-8730 94662-8097
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TITLE MEMBERS OF TNF AND TNFR FAMILIES

FILING FEE RECEIVED \$1,514	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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